*Motion to pass*

Sri K. K. HEGDE.—Sir, I beg to move:

"That the Mysore Nurses, Midwives and Health Visitors Bill, 1960, as amended, be passed."

MR. DEPUTY SPEAKER.—The question is:

"That the Mysore Nurses, Midwives and Health Visitors Bill, 1960, as amended, be passed."

*The motion was adopted.*

MR. DEPUTY SPEAKER.—The House will now adjourn for lunch and meet at 3-00 P.M.

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*The House adjourned for recess at Forty Minutes past Twelve of the Clock and reassembled at Ten Minutes past Three of the Clock.*

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[MR. DEPUTY SPEAKER in the Chair]

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## MYSORE AYURVEDIC AND UNANI PRACTITIONERS' REGISTRATION AND MEDICAL PRACTITIONERS' MISCELLANEOUS PROVISIONS BILL, 1960 AS REPORTED BY SELECT COMMITTEE.

*Motion to Consider.*

Sri K. K. HEGDE (Minister for Health).—Sir, I beg to move:

"That the Mysore Ayurvedic and Unani Practitioners' Registration and Medical Practitioners' Miscellaneous Provisions Bill, 1960, as reported by the Select Committee, be taken into consideration."

MR. DEPUTY SPEAKER.—Motion moved:

"That the Mysore Ayurvedic and Unani Practitioners' Registration and Medical Practitioners' Miscellaneous Provisions Bill, 1960 as reported by the Select Committee, be taken into consideration."

†Sri K. K. HEGDE.—This Bill which had come up before this House in July last, has been referred to the Select Cammittee consisting of 12 members and a report of the Committee was submitted to the same session. The Committee had six sittings and made some recommendations and they have suggested some changes. In item (1) of clause 2, in the definition they would like to add the definition of 'integrated system'. In sub-clauses (1) and (2) of Clause 3, instead of having two Boards for the different systems of medicine, the Committee felt that there should be only one Joint Board. In sub-clause (3) the Committee recommended that instead of the President of the Board being a person

nominated, he should be elected from amongst the members and as such, instead of five nominees, Government nominate six members.

In sub-clause (5), it is recommended that the first President be nominated. In Clause 7 provision is made for filling of vacancies by the respective categories by nomination or election as the case may be. In Clause 16 instead of 15 years, the Committee recommended that the period of regular practice may be reduced to ten years. In Clause 19 the Committee recommended that instead of yearly fee of Rs. 5 the renewal fee be fixed at Rs. 10 once in five years. Clause 20 - sub-clause (1), item (3), the Committee recommended that for 'institutions that are receiving grant', 'institutions that supported by or receiving grant from the State Government' be substituted. So far as clause 20 is concerned, the committee felt that the scope of the finances should not be limited and so they have made this change. In clause 33, since the Bombay Medical Registration Act should be repealed, this clause is amended. Clause 50 was deleted and new clauses have been added. I request Hon'ble Members to accept the amendments suggested by the Select Committee.

†Sri V. SRINIVASA SHETTY.—Sir, I wish to say a few words on this important Bill. The idea seems to be fairly good enough. But the misfortune is, it is a common misfortune in all cases practically, that Government refuses to see reason. But, I think, at least after considerable lapse of time the Hon'ble Minister in charge of this Bill would see at least some of our requests were reasonable. Sir, I think this Bill was introduced 2 or 3 years ago and we had a number of discussions with him and he would not see any of our points to be reasonable at that time. As times passed on, he began to see, step by step, some of our reasons and incorporated some of our suggestions.

Sri C. M. ARUMUGHAM.—Does it mean to say that he takes too much of time to understand ? *(laughter)*

Sri V. SRINIVASA SHETTY.—That is a common disease with all the gentlemen on that side.

Sri K. K. HEGDE.—Is it a contageous disease which came from the other side ? *(laughter)*

Sri V. SRINIVASA SHETTY.—I hope not, Sir, the Hon'ble Minister has seen at least some reason in some of our demands and incorprated them in this. In the original Bill there was no definition of integrated medicine and only two categories G.C.I.M. and L.I.M. of the Madras University were recognised as belonging to the integrated system of medicine. Now, two other systems–Ayurveda and Unani–are recognised and defined. I am very glad that the Hon'ble Minister has given a separate definition and included 19 items in the Schedule. Sir, one of the grouses of some of these unfortunate gentlemen, is, though the curriculam shows that the major portion of their time is spent in the study of alopathy system of medicine, the Government, in their anxiety to strengthen Ayurveda, say that they will not be allowed to practice that system of

(SRI V. SRINIVASA SHETTY)

medicine which for nearly 5 to 5½ years they have been taught in their colleges. That was one of the demands which we made. For example, in the Government College of Indian Medicine, Mysore, after the college course of 5½ years, which is much more than the M.B.B.S. Course, they have to put in 21 months of hospital training in alopathy and 8 months hospital training in Ayurveda. Yet, Government says, they should not dispense with the modern system of medicine. They should only dispense with Asawas and Arishtas. In Clause 20 (4), they say, a registered practitioner may posess and prescribe the poisonous drugs of the system or systems of medicine to which he belongs. I do not know what exactly is the meaning of this sub-clause.

Possible to Government it may mean the Unani and Ayurveda systems where conjoined study is made by the student. Sir, this is a grave injustice to the student. They have made three classifications–Ayurveda, Unani and integrated system of medicine. That is the result of the Select Committee deliberations and the belated wisdom of the Government. I request the Hon'ble Minister to tell us in what way the Ayurveda Vidwan and L.A.M.S. of the Government College, Mysore and the Taranath Ayurveda Vidya Peetha of Bellary are better than the G. C. A. M. of Mysore College ? They are classified under the Head of Integrated System.

3–30 P.M.

Now Sir, I know what specific and clear-cut opinions the Government have in regard to some of these institutions, for example the Taranath Vidya Peetha. They have recognised it as coming under the integrated system of medicine. Sir, I know some of these institutions referred to in the schedule. I am sorry I should not be mistaken as saying anything against the Government. I want to say only one thing : there are students of our own university. The Mysore University students studying in the Government College of Indian Medicine, Mysore. It is called the graduate course in Ayurvedic Medicine. GCAM. It is a 5½ years course. I will only refer to modern medicine taught to these people in the five years course. In the first year : anatomy including embiology, physiolgy, bio–chemistry ; in the second year. anatomy including embiology and pre–clinical, bio–chemistry ; in the third year, modern medicines, pharmocology, meteriamedica, pathology including bacteriology, parasitology and clinical medicine and minor surgery ; in the fourth year, modern medicine, pathology continued, clinical course, hygeine (one year's course) and jurisprudence ; fifth year : surgery course, obstetrics and gyneocology, practical hospital work and clinical practice during the entire course-medical wards, surgical wards. After the course, 21 months of hospital training in allopathy and 8 months in Ayurveda. I should like the Hon'ble Minister for Health to say which of these other courses shown in the schedule is better than our course and in

which of those courses in the quantum of modern medicine taught more that here. Is it fair for you to classify our students with all these 19 catogories of students ?

Sri B. D. JATTI.—May I know one point from the Hon'ble Member ? Is it the intention of the Hon'ble Members that these students who get the degree should practice Ayurveda or both Ayurveda and Allopathy?

Sri V. SRINIVASA SHETTY.—Both Sir.

Sri B. D. JATTI.—The intention of the Government of Mysore is that they should practice only Ayurveda and not Allopathy. Otherwise, it is better to start one more Alopathic medical college.

Sri V. SRINIVASA SHETTY.—I am really very happy about the intention of the Government. The intention is not evident.

Sri B. D. JATTI.—The point is, so far there were a number of courses-diploma and degree courses, where both ayurvedic and allopathic medicines were taught. That is why they were allowed to practice in both systems. But when we started the degree course, it was the intention to give a degree only in Ayurveda and allow students to practice ayurveda. With that condition they were admitted and if they are not prepared to practice ayurveda, it is up to them not to get admitted to the ayurveda medical college.

†Sri J. B. MALLARADHYA.—Sir, having been a member of the Joint Select Committee, I would not have ordinarily spoken. But since the Hon'ble Chief Minister has made a statement, I should like to remind him this : luckily or unluckily I happened to be with him when he visited the Ayurvedic College at Mysore when a batch of students waited on him and made their representation. There is a lot of substances in what the Hon'ble Chief Minister has said. I know that either we should be fish or flesh and there can be no course between the two. Either they should be Ayurveda Practitioners or Allopathic Practitioners. But previous history in this case points altogether in a different direction When these students were admitted into that college, there was nothing on record to show that they would be treated differently from the same category of students. Now according to the decision of the Joint Select Committee, all these 19 categories of people come under the list of integrated medicine. It seems to be there is no justification whatever for treating them in a different manner. I am sorry, I was not present at the meeting. I could have pressed the same view. But if the intention of the Government is very clear, they should not make this applicable to the present batch of students who are there right from the first year to the last year. That is the only compromise that is possible. You make it known to the people who join the college from the academic year 1962 that if you join this college, you will not be allowed to practice the integrated system of medicine, but only Ayurveda. But students have already joined and they are in various classes and now if you tell them that you must only practice ayurveda, it would be unfair. From the

(Sri J. B. MALLARADHYA)

year 1962, please restrict admission on that basis. Give wide publicity to your intentions and see that your intentions are translated into action. That seems to be the only compromise. But on no account should you make the present batch of students suffer. That is my appeal to the Hon'ble Chief Minister and also to the Health Minister. I know, that both of them are interested in both the systems of medicine, but let us call ayurveda by Sudha Ayurveda in future. I am entirely in agreement with that, let there be no compromise on it, but having included the present batch of people in the category of integrated medicine it would be discriminating against them if you deny that right to them. If you do not allow them that right I am afraid there will be a number of writ petitions. Of course, the Government may not be afraid of that, but in the interest of doing justice to them they should be given this right.

†Sri K. K. HEGDE.—Probably my friend Sri Mallaradhya has a wrong noti n about it. It was the intention of Government either to have pure ayurveda or allopathy. With that idea a Committee was constituted in 1957 which went into the whole question and decided that we should not have an integrated system, but we should have either pure ayurveda or pure allopathy. With that idea a syllabus was formulated and from 1957 onwards this is followed. The boys admitted after 1957 are allowed to practice only pure ayurveda. The curriculum formed for G.C.A.M. contained 65 persent allopathy and only 35 persent ayurveda. But in order to give them a firm foundation for the development of ayurveda the curriculum was revised and the subjects taught are 35 persent allopathy and 65 persent ayurveda. My friend Sri Mallaradhya says that the pure ayurveda system should be enforced only from 1962, but from what I stated just now he will find that his information is not correct. If we concede his point now, to-morrow somebody else will come forward and say that it should be enforced from 1971. There should be some finality to it and that is why the Committee appointed in 1957 evolved a new curriculum from 1957 and it was thereupon decided that students joining thereafter should be allowed to practice only ayurveda. It was only for the students who were in college then that this concession was allowed just because the curriculum for them was printed late. So I do not think there would be any injustice done to the students now in college if they are restricted to practise only ayurveda.

As regards the other categories who have been included in the list, we thought we should be as liberal as possible. If those people are allowed to practise both the systems in their own States, in our State also we should not harass them. It is only with that idea that they have been given this right.

Sri V. SRINIVASA SHETTY.—I am unable to understand the statement of the Hon'ble Minister. What is to happen to the students from the

various colleges mentioned in the schedule here ? If they are allowed to practise the integrated system, why should there be on our students ?

Sri K. K. HEGDE.—If in their States they are allowed to practise both the systems, then we cannot help and we cannot deprive them of their right.

Sri M. C. NARASIMHAN.—If it is harassment to those who are already in practice, will it not be harassment to those who come to practise in future ?

Sri B. D. JATTI.—In our State we are having one Government Ayurvedic College and two private institutions. All these 3 institutions are mainly Ayurvedic and it is only for their basic understanding that Allopathy is taught. The students getting degrees from these colleges can practise only ayurvedas system, but as far as students from other State are concerned, we have no control over them if they are allowed to practise the integrated system in their States.

Sri V. SRINIVASA SHETTY.—It is will lead to an anomalous situation if students of other State colleges having the same course as the students of our colleges are allowed to practise the integrated system and our students are restricted to practise only pure ayurvedic system.

Sri B. D. JATTI.—The degree course that we have introduced covers 35% allopathy and 65 per cent ayurveda. The intention is to train our students in Ayurveda only and specialise them in research and development of Ayurveda by introducing post-graduate courses in ayurveda. There is a complaint against the Government that we do not encourage Ayurveda. That is why we want to restrict them to Ayurveda and give them all the facilities to develop ayurveda so that Ayurveda can be compared with Allopathy. After we give them all the facilities if they do not come up to the standard, then he can say that it has not come up to the Standard. So it is no use having an integrated system in the College and blaming ayurveda.

Sri V. SRINIVASA SHETTY.— But from the course of studies we find that a major portion of the studies is in modern medicine.

Sri K. K. HEGDE.—This point was gone through and it was found that only 35 per cent of the course is in Allopathy and the remaining 65 per cent is in Ayurveda.

Sri J. B. MALLARADHYA.—I have got the syllabus before me. For instance, in the first year Ayurveda gets 10 hours per week and modern medicine 9 hours per week. In the second year also the same is the case. So what you say is not borne out by facts.

Sri K. K. HEGDE.—Allopathy is added only to facilitate them to understand Ayurveda better.

Sri J. B. MALLARADHYA.—Anatomy including embriology 4 hours per week, physiology 3 hours per week, histriology and bio-chemistry, 2 hours and the three together 9 hours, whereas Ayurveda is taught for 10 hours per week. It is not 65 per cent and 35 per cent as made out.

Sri B. D. JATTI.—Certain subjects are common. For example anatomy is common to both, whatever be the name that may be given.

Sri V. SRINIVASA SHETTY.— I would earnestly appeal to the Government not to stand fast to their guns. The students who have joined the Ayurvedic institutions are not mere S. S. L. Cs. but are students who are entitled to get admission into Allopathic Medical Colleges. If the idea of the Government was that the Ayurvedic students should be completely disabled from practising allopathy, that should have been made quite clear by way of a public announcement or notification. The students would then be clear in their minds as to where they stand. Of course it is stated now that from this year an agreement would be taken from the students that they would serve for 3 years in the rural parts.

Sri K. K. HEGDE.—Not in rural parts. But they should be in Government service.

Sri V. SRINIVASA SHETTY.—But my question is whether is a specific undertaking that they would not be allowed to practice modern medicine. Where is such agreement.

Sri M. C. NARASIMHAN.—May I know if there is any provision in this Bill which specifically says that a person registered as Ayurvedic physician cannot practice Allopathic medicine ?

Sri V. SRINIVASA SHETTY.—Section 20 (4) says that a "registered practitioner may possess and prescribe the poisonous drungs of the system or systems of medicine to which he belongs" which by implication suggests that an Ayurvedic doctor cannot practise Allopathy.

I would once again repeat that on humanitarian grouds, the stundents of Ayurvedic institutions should be allowed to practise Allopathy also. They have had no notice of Government's intention to debar them from Allopathy. The difficulty has arisen only after the Bill has emerged from the Select Committee. In its original form, the Bill did not contain such a provision. The physicians coming from Madras, Bombay and Kerala are treated on a better footing whereas our students, from our own institutions, are discriminated. This is not right and the Minister must see his way to adjust matters.

†Sri M. C. NARASIMHAN.—Sir, this Bill having gone to the Select Committee, with all due respects to the Members of the Committee, this Bill is likely to create more trouble and confusion. I am saying not only on the merits of the Bill, but even legally speaking, it is not a very happy Bill.

First, the difinition clause on Ayurveda is not happy. The definition says :

> "Ayurvedic system of medicine" or "the Ayurvedic System" means the Ayurvedic system of medicine whether supplemented or not by such modern advances as the Board may from time to time determine".

I do not know who the Board can determine modern advances in Ayurveda. If modern advances is to be supplanted on Ayurveda, I take it that it refers only to advances made in Allopathy. Ayurveda has come to us thousands of years and it is consolidated. Therefore I do not think there is any possibility of modern advances in respect of Ayurveda.

Sri K. K. HEGDE.—Is it the Hon'ble Member's opinion that no advance is possible in Ayurveda.

Sri M. C. NARASIMHAN.—That is so. Ayurveda may progress according to Ayurvedic standards but modern advances can take place only when Ayurveda is superimposed on Ayurveda. I know the Minister for Health as an Allopathic doctor would not admit that Ayurveda is scientific and is not capable of scientific analysis. In any case the Doctor's, Sri Hegde's knowledge of Ayurvedic system is much less compared to mine, I suppose. In any case, I fail to understand the real meaning of this phrase, 'modern advance.

4-00 P.M.

If modern medicine is a thing which is to be totally determined by a Board, I fail to understand how the Minister can say that the G.C.A.M. course should be only included in the Ayurvedic section and not in any other section. You must leave the classification of this to a Board and not arrogate this to yourself. Schedule making classification of Ayurveda, Unani and Allopathy is really out of place with the definiton as given in clause (*a*). If you refer to clause 2 (*e*), 'integrated system' is defined as 'means a conjoint study, training and practice in indigenous medicine and modern medicine.' As the definition stands, there is no 35 per cent, 65 per cent. The Minister was quarrelling with the Hon'ble Member who preceded me, saying that it is only 35 per cent of Allopathy. I want you to read very carefully the definition. It simply says that it shall be a conjoint study, training and practice in indigenous medicine and modern medicine.' Where is 35 per cent? Even if it is two per cent of Allopathy, then it comes under the integrated system. If there is even a little bit of Allopathy, then it is clear that you cannot classify it as Ayurveda; you must definitely bring it under the integrated system.

The other important aspect of the Bill is, the Bill is not intended to regulate the practice of medicine; it is only for the purpose of registration and as contemplated in section 20, for conferring a few benefits enumerated in four sub-clauses. I am doubtful as to whether a person whose name is entered in the register cannot practise some other system of medicine. Anyway, it is for the Minister to tell us what exactly it is.

Next, I refer to sections 16 and 18. Section 16 speaks of registration of practitioners. Persons who have passed qualified examination have a right to get their name entered in the register. Sub-section (2) provides

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that those people who have been practising for not less than ten years prior to the date on which this Act comes into force, are also entitled to be registered. If he pays Rs. 15, Government says that he is as good as other person who has passed the examination. If a person has been practising for 10 years prior to the date of enforcement, he is entitled to be registered under section 16; but if he is practising only for 5 years, then he is not enitled to be registered straightaway, but he must show that he has practised for five years and then after a period of five years or at least before the expiry of the period of five years, he must pass certain examination. The Hyderabad Act simply said that if anybody has a reputation of practising in Ayurveda, he shall be entitled to be registered in the medical register. According to sub-section (3) of Section 18, after five years, he must pass certain examination. Supposing there is a person who has practised for 7 years; if he has practised for 7 years, then he can wait for 5 years. He would have practised for 12 years; after 12 years he has to pass an examination.

Sri K. K. HEGDE.—Not after 12 years, but within 12 years.

Sri M. C. NARASIMHAN.—Up to 5 year period he is entitled to get his name entered in the medical register. The requirement is that he has to pass an examination. If he has practised for 8 years and after 3 or 4 years, he can wait for 12 years of practice within which he is required to pass an examination in pursuance of section 18 (3). But in the previous clause you accept the principle that even if it is 10 years' practice, it is sufficient for purpose of having his name entered in the register. Here is if an inconsistency. If according to section. 16 (2) you consider that 10 years of practice is sufficient yard stick for the purpose of entering his name in the register and giving him certain benefits in terms of section 20, why don't you accept it all along. Why make a distinction between the category of persons who are there in the past prior to the enforcement of the Act and persons who claims the rights after the Act comes into force? This is something which is inconsistent and which is irrational and does not do any justice to the system of medicine. If you merely say under section (2), unless a person practises for not less than 10 years, he is not entitled to get his name entered in the medical register. I can understand; why to the enforcement of the Act. Another difficulty is, we do not know what examination that you intend......

Sri K. K. HEGDE.—Examination conducted by the Board.

Sri M. C. NARASIMHAN.—Sir, we would like to know the type of examination.

Sri K. K. HEGDE.—The Board will decide.

Sri M. C. NARASIMHAN.—Sir, the Board may suddenly decide and say and Ayurveda is not advanced and so we will add a little integrated system of medicine hereafter. Probably with a Minister like you who

has a biased view, they may do so. It is because of that I am interested. Sir, I feel there is no justification for insisting on a further examination after five year period of practice.

Sir, the most important clause in this Bill, according to me, is clause 20. This clause enumerates only three main benefits–right to issue certificates; to hold appointment as a medical officer in any medical institution and to possess and prescribe poisonous drugs of the system to which he belongs.

Sir, so far as the integrated courses are concerned, these persons may not be recognised for any particular appointment which require knowledge in Allopathy. This is a right which was already in Bombay Act and Hyderabad and Madras Acts.

Sri K. K. HEGDE.—We are not depriving the right.

Sri M. C. NARASIMHAN.—You are depriving of a benefit and it was an important benefit. It is true that the appointing authority will prescribe the qualifications. Do you treat these persons as capable of practicing Allopathic system or have you any doubts? If you want to have a policy of sit on the wall, scrap it. They are not recognised as persons to practice Shudda Ayurveda and they are not entitled to go into Allopathy because the qualification would be M.B.B.S. or L. M. P. You can safely adopt the provision of Bombay or Hyderabad Bill. Sir, this is something ununderstandable. The amendment makes matters worse. Sub-clause (4) was not there in the Madras Act or Hyderabad Act.

What was the special circumstances which warranted for the introduction of this clause ? It is taken care of by the Central Act. Any person issuing, whether knowingly or otherwise these drugs, if prescribes such a medicine which leads to a fatal accident, whether you say it or not, the criminal law will be still there. Why you introduce this particular restriction is not clear to me. A person practicing the so called integrated system of medicine or a G.C.A.M. who knows some elements of Allopathy medicine will be debarred from issuing any of these drugs. It may be a minor dose. Even for a small dosage of Anascin, doctor's prescription is insisted upon. There are varieties of medicines and some of them may not be serious. So, why this provision and how is it relevant with registration ? Is it a privilege ? I cannot understand that it is a privilege. Sir, Chapter III is not to be enforced immediately. It will be brought into force at a subsequent date as the State might deem it fit. Proviso to sub-section (2) of section 34 says.

> "Provided that any person who mechanically fits or sells lenses, artificial eyes............................without personal gain furnishes medical treatment or does domestic administration of family remedies shall not be deemed to practise within the meaning of this section.",

Sir, I do not know what family remedies are.

Sri K. K. HEGDE.—You know in the villages, there are some people who say that they have got some knowledge of remedy and give treatment.

Sri M. C. NARASIMHAN.—Sir, the first portion of this proviso would be that if there is a philanthropic institition then it can engage in its service any person who is not duly qualified. He may have five years experience or 10 years experience. The only requirement for exemption is that he should be philanthropic. Now I ask whether this a correct yard stick.

Sri K. K. HEGDE.—It means that he is not there for money. The person who takes medicine with him will make due verification and then go to him for medicine.

Sri M. C. NARASIMHAN.—Then why have this legislation? After all, it has been there from time immemorial. It might have led to small difficulties here and there. We have nothing on record to show that people who have not passed any examination, practise ayurveda. If there is any serious investigation, then this Bill may be justified and after all, in the old Mysore area, Sri Mallaradhya and others....

Sri J. B. MALLARADHYA.—The one matter in which I did not advise the Government of Mysore is Ayurveda.

Sri M. C. NARASIMHAN.—My objection is that simply because a person comes forward and says that he will administer medicine not for personal gain, but due to philanthropic motive, should he be exempted from qualification? Qualification is a definite and important matter.

Lastly Sir, I come to this schedule. Much has been said by my friend Mr. Setty and also by the Hon'ble Leader of the Opposition. It looks as if, that the Minister for Health and the Chief Minister who some time back was inclined to concede this point seems to have changed his mind and gone back on the assuranee. I will not repeat these points.

If there was any assurance held forth to the students that they will practise only Ayurveda and not integrated medicine, there must be something in the prospectus. So far as I see the prospectus which is issued through Government Order, I do not find this at all. It does not say that they precluded from practising the integrated medicine. Even the curriculam contained in the prospectus contains some portions of Allopathic medicine and even a little bit of Allopathic medicine would be deemed quite sufficient eligibility to claim for these people to practise the integrated system. Technically speaking and legally speaking, the schedule according to me is definitely out of order.

I will also point out certain other arguments, Sir. In the schedule, in the first portion only examinations are enumerated. In the second portion, the institution which conducts these examinations is prescribed. In the third portion, place is prescribed. As I understand the schedule demands that these examinations must be capable of being conducted by such an institution. If that institution does not conduct that examination, the schedule to that extent will be inoperative. I will

point out aspect about the G.C.A.M. Sir, in the integrated system. I understand Ayurveda Vidwan–L.A.M.S. examination has to be conducted by the Government Ayurvedic and Unani College. I understand that from next year, the L.A.M.S. examination is not going to be conducted by the Government Ayurvedic College, but by the Board of Studies in Indian Medicine. It will cease to operate according to me, it will have no validity in regard to the L.A.M.S.

Secondly Sir, you will find that this C.E.A.M. course is a controversy before us. In respect of this, I would like to know as to whether the Director of Medical Services has submitted any report in this regard and as to whether the Government consulted the D.M.S.

Mr. DEPUTY SPEAKER.—The time alloted for this Bill is $1\frac{1}{2}$ hours. It is drawing to a close.

Sri M. C. NARASIMHAN —Sir, the only point is the classification should bear some rationale. Under the integrated medicine and other courses, there are items I to 19 in the schedule. If all these things had a common subject, both to Allopathy and Ayurveda, then only they will be justified in including it. My information is that items 1 to 19 include in them all Allopathic subject. But the yardstick in terms of this Bill, that it should be joint study. What justification have you? You blow hot and cold in the same breath.

Lastly, I was looking into the legal provisions on the point whether one is entitled to do such a manipulation. This book is Bidra's interpretation of the statutes, which supports the view that the schedule does not control the laws, but laws control the schedule. Even legally speaking, I do not think that the schedule whereby the G.C.A.M. which is taught in the State can ever be included under the Ayurveda system and not as an integrated system.

Mr. DEPUTY SPEAKER.—The House will adjourn for half-an-hour.

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*The House adjourned for recess at Thirty Minutes past Four and reassembled at Five of the Clock.*

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5-00 P.M.

(Mr. DEPUTY SPEAKER in the Chair)

† ಶ್ರೀ ಸಿ. ಜೆ. ಮುಕ್ಕಣ್ಣಪ್ಪ.—ಸ್ವಾಮಿ, ಈ ಮಸೂದೆಯ ಮೇಲೆ ಚರ್ಚೆಗೆ ಒಂದು ಗಂಟೆ ಕಾಲಾವಕಾಶ ಹೆಚ್ಚಿಗೆ ಮಾಡಬೇಕು ಎಂದು ಕೇಳಿಕೊಳ್ಳುತ್ತೇನೆ.

ಉಪಾಧ್ಯಕ್ಷರು.—ಟೈಂ ಆಗಿದೆ. Business Advisory Committee ಯವರು ಗೊತ್ತು ಮಾಡಿದ ಅವಧಿಯಲ್ಲಿ ಕೆಲಸ ಮಾಡಬೇಕಾಗುತ್ತದೆ.

ಶ್ರೀ ಸಿ. ಜೆ. ಮುಕ್ಕಣ್ಣಪ್ಪ.—ದಯವಿಟ್ಟು ಒಂದುಗಂಟೆ ಹೆಚ್ಚಿಗೆ ಮಾಡಿ.

ಅಧ್ಯಕ್ಷರು.—ಹತ್ತು ನಿಮಿಷಗಳಲ್ಲಿ ಸದಸ್ಯರು ತಮ್ಮ ಭಾಷಣವನ್ನು ಮುಗಿಸಬೇಕು.

ಶ್ರೀ ಸಿ. ಜೆ. ಮುಕ್ಕಣ್ಣಪ್ಪ.—ಸ್ವಾಮಿ, ಈ ಸಭೆಯಲ್ಲಿ ನಾನು ಮಾತನಾಡಬೇಂದು ಎದ್ದು ನಿಂತರೆ ಅಧಿಕಾರದಲ್ಲಿದ್ದ ಜನರಿಗೆ ಕಸಮಿಸಿಯಾಗುತ್ತದೆ. ಅಧಿಕಾರದಲ್ಲಿದ್ದವರು ಅಡ್ಡದಾರಿ ಹಿಡಿದಿರುವುದರಿಂದ ಏನಾದರೂ ಎರಡು ಒಳ್ಳೆಯ ಮಾತು ಹೇಳಬೇಕೆಂಬ ಆಶೆಯಾಗಿದೆ.

ಉಪಾಧ್ಯಕ್ಷರು.—ಈ ಮಸೂದೆಗೂ ಅವರು ಹೇಳುವುದಕ್ಕೂ ಏನು ಸಂಬಂಧವಿದೆ?

ಶ್ರೀ ಸಿ. ಜೆ. ಮುಕ್ಕಣ್ಣಪ್ಪ.—ಸತ್ಯಕ್ಕೋಸ್ಕರ, ಪ್ರಜಾಪ್ರಭುತ್ವಕ್ಕೆ ಅಡ್ಡಿ ಆತಂಕ ತಂದಿರುವುದರಿಂದ ಇದನ್ನು ಹೇಳುತ್ತೇನೆ. ಈಗಾಗಲೇ ಈ ವಿಧೇಯಕದ ಮೇಲೆ ಚರ್ಚೆಯಾಗಿದೆ ಸೆಲೆಕ್ಟ್ ಕಮಿಟಿಗೆ ಹೋಗಿ ಬಂದಿದೆ. ಅಲ್ಲಿ ಇಲ್ಲಿ ಒಂದೆರಡು ವಾಕ್ಯಗಳನ್ನು ಬದಲಾವಣೆ ಮಾಡಿದ್ದಾರೆ. ಆದರೆ ಇದರಲ್ಲಿರುವ ಲೋಪದೋಷಗಳು ಅವರಿಗೆ ಕಾಣುತ್ತಿಲ್ಲ! ನಾವು ಇದನ್ನು ಹೇಳಿದರೆ ಆದೇನೋ ಹೇಳುತ್ತಾರಲ್ಲ "ಇದ್ದುದನ್ನು ಇದ್ದಹಾಗೆ ಹೇಳಿದರೆ ಸಿದ್ದಪ್ಪನಿಗೆ ಸಿಡಿಲು ಬಡಿಯಿತು" ಎಂದಹಾಗೆ ಸರ್ಕಾರದವರಿಗೆ ಕೋಪಬರುತ್ತೆ. ಏತಕ್ಕೆಂದರೆ ಈಗ ಆಡಳಿತ ನಡೆಸುತ್ತಿರುವ ಜನಗಳೇನಿದ್ದಾರೆ ಇವರು ಪ್ರಜಾಪ್ರಭುತ್ವವನ್ನು ಉದ್ಧಾರ ಮಾಡತಕ್ಕ ಜನಗಳೆಂದು ಅವರೇನು ಹೇಳಿಕೊಳ್ಳುತ್ತಿದ್ದಾರೆ ಅಂಥವರು ಈಗ ಅವರು ಮಾಡುತ್ತಿರುವ ಕೆಲಸಗಳೇನು ಎಂಬುದನ್ನು ಅವರು ಸ್ವಲ್ಪ ಅರ್ಥಮಾಡಿಕೊಳ್ಳಬೇಕಾಗಿದೆ. ಅವರು ನಾವು ಹೇಳುವುದನ್ನು ಕಿವಿತೆರೆದು ಕೇಳಬೇಕು, ಕಣ್ಣುತೆರೆದು ನೋಡಬೇಕು. ಅವರೀದಿವಸ ಈ ಬಿಲ್ಲಿನಲ್ಲಿ ಬರೆದಿರುವುದನ್ನು ಮತ್ತೊಮ್ಮೆ ಓದಿ ಪ್ರತಿ ಪದ ಪದಕ್ಕೂ ಅರ್ಥವೇನೆಂಬುದನ್ನು ಅವರು ಗ್ರಹಿಸಬೇಕು. ಪ್ರತಿಪದಕ್ಕೂ ಒಂದು ಅರ್ಥವಿವರಣೆ ಇದೆ.

ಶ್ರೀ ಬಿ. ಬಸವಲಿಂಗಪ್ಪ (ಗೃಹಶಾಖೆಯ ಉಪಮಂತ್ರಿಗಳು).—ನೀವು ಈ ಬಿಲ್ಲನ್ನು ಓದಿದ್ದೀರಾ?

ಶ್ರೀ ಸಿ. ಜೆ. ಮುಕ್ಕಣ್ಣಪ್ಪ.—ಈ ಡೆಪ್ಯುಟಿ-ಹೋಂ ಮಿನಿಸ್ಟರಿಗೆ ಈ ಪ್ರಪಂಚದಲ್ಲಿ ಗೊತ್ತಿರುವುದು ಎರಡೇ ವಿಚಾರಗಳು. ಒಂದು ಪಿಕ್-ಪಾಕೆಟ್ ಮಾಡಿದವರನ್ನು ಹಿಡಿದು ಜೈಲಿಗೆ ಹಾಕುವುದು. ಮತ್ತೊಂದು ಹೆಂಡ ಕುಡಿದವರನ್ನು ಹಿಡಿದು ಜೈಲಿಗೆ ಹಾಕುವುದು. ಈ ಎರಡನ್ನು ಬಿಟ್ಟರೆ ಬೇರೆ ಏನೂ ಗೊತ್ತಿಲ್ಲ. Please let me know whether he has read this Bill and if so what are his remarks? ಹಾಗೆ ಅವರು ಓದದೆ ಇರುವಾಗ ಮತ್ತೊಬ್ಬರಿಗೆ ಹೀಗೆ ಹೇಳಿದರೆ Is it fair? ಮಾನ್ಯ ಗೃಹಶಾಖೆಯ ಮಂತ್ರಿಗಳಿಗೆ ಗೊತ್ತಿರುವುದು ನಾನಾಗಲೇ ಹೇಳಿದಂತೆ ಎರಡೇ ಎರಡು ವಿಚಾರಗಳು ಮಾತ್ರ. ಆ ಸಿನೀಮಾ ಥಿಯೇಟರುಗಳ ವಿಚಾರ ಮತ್ತು ಜೈಲುಗಳ ವಿಚಾರ. ಈಗ ಈ ಬಿಲ್ಲಿನಲ್ಲಿ ಹೇಳಿರತಕ್ಕ 'ಮಾಡರ್ನ್ ಅಡ್ವಾನ್ಸ್' ಎಂದರೇನು? ಎಂಬುದಕ್ಕೆ ಅವರು ಅರ್ಥ ಹೇಳಬಲ್ಲರೇನು? "ಮಾಡರ್ನ್ ಅಡ್ವಾನ್ಸ್" ಎಂದರೇನು! ಯಾವ ಬಾಬಿನಲ್ಲಿ ಔಷಧಿಗಳಲ್ಲೇ, ರೋಗಿಗಳ ಪರೀಕ್ಷೆಯಲ್ಲೇ, ಅಥವಾ ಆಸ್ಪತ್ರೆ ದಾಖಲಾತಿಗಳನ್ನಿಡುವುದರಲ್ಲೇ ಯಾವುದರಲ್ಲಿ ಈ ಮಾಡರ್ನ್ ಅಡ್ವಾನ್ಸ್? ಇದರ ಅರ್ಥವೇನೆಂಬುದನ್ನು ನಮಗೆ ತಿಳಿಸಲಿ. ಒಳ್ಳೆಯದಾಗಿದ್ದರೆ ನಾವೂ ಸಹ ಅದನ್ನು ಒಪ್ಪಿಕೊಳ್ಳುವುದಕ್ಕೆ ಸಿದ್ಧರಾಗಿದ್ದೇವೆ. ಆದರೆ ಸರ್ಕಾರದವರಿಗೆ ಅವರೇನು ಮಾಡುತ್ತಿದ್ದಾರೆ—ಅವರ ಬರವಣಿಗೆಯ ಅರ್ಥವೇನು ಎಂಬುದು ಅವರಿಗೇ ಅರ್ಥವಾಗದಿರುವಾಗ ಅದನ್ನು ನಮಗೆ ಒಪ್ಪಿಕೊಳ್ಳಬೇಕೆಂದರೆ ಅದು ಹೇಗೆ ಸಾಧ್ಯವಾಗುತ್ತದೆ? ಸರ್ಕಾರದವರು ಈ ತರಹೆಯ ಬಿಲ್ಲನ್ನು ತರುತ್ತಿರುವುದನ್ನು ನೋಡಿದರೆ ಸರ್ಕಾರದವರು ಹೇಗೆ ಅರ್ಥವಿಲ್ಲದ, ಕಲ್ಪನೆಗೆ ದೂರವಾದ ಮಸೂದೆಗಳನ್ನು ತಂದು ಈ ಸಭೆಯ ಕಾಲಹರಣಗೆ ಕಾರಣರಾಗಿದ್ದಾರೆಂಬುದು ಇದರಿಂದ ಎದ್ದು ಕಾಣುತ್ತಿದೆ. ಈ ದಿವಸ ನಮ್ಮ ಮುಂದೆ ಬಂದಿರತಕ್ಕ ಬಿಲ್ಲಿನಲ್ಲಿರುವ ಕೆಲವು ಕ್ಲಾಜುಗಳು ಹಿಂದೆ ಈ ಸಭೆಯ ಮುಂದೆ ಬಂದಿದ್ದ ಒರಿಜಿನಲ್ ಬಿಲ್ಲಿನಲ್ಲಿರಲಿಲ್ಲ—ಸೆಲೆಕ್ಟ್ ಸಮಿತಿಯವರ ಮುಂದೆ ಸರ್ಕಾರದವರು ಈ ವಿಚಾರವನ್ನು ತಿಳಿಸಲಿಲ್ಲ. ಈಗ ಏಕಾ ಏಕೀ ಈ ಕೆಲವು ಜನರಿಗೆ ಕಿರುಕುಳ ಕೊಡತಕ್ಕ ಕ್ಲಾಜುಗಳನ್ನು ಸೇರಿಸಿ ತಂದಿದ್ದಾರೆ. ಇದರ ಅರ್ಥವೇನೆಂಬುದೇ ಗೊತ್ತಿಲ್ಲ. ಇದರ ಒಳ ಹೊಕ್ಕು ನೋಡುವುದಾದರೆ

ಇದರಲ್ಲಿ ರಾಜಕೀಯ ತುಂಬಿ ತುಳುಕುತ್ತಿದೆ. ಇದರಲ್ಲಿ ಮುಖ್ಯಮಂತ್ರಿಗಳ ಕೈವಾಡವೇ ಬಹಳ ಜಾಸ್ತಿ ಇದ್ದಂತೆ ಕಾಣುತ್ತದೆ. ಈ ಹಿಂದೆ ಆ ತಾರಾನಾಥರ ಆಶ್ರಮದ ವಿಚಾರದಲ್ಲಿ ಅಲ್ಲಿ ಬೆಡ್‌ಗಳಿಲ್ಲ-ಮಣ್ಣಿಲ್ಲ-ಮಸಿಯಿಲ್ಲ ಎಂತ ಹೇಳುತ್ತಿದ್ದವರು ಈ ದಿವಸ ಏಕ್‌ದಂ ಆ ಆಶ್ರಮವನ್ನು ಸಹ ಈ ಬಿಲ್ಲಿನಲ್ಲಿ ಆಗಲೇ ಸೇರಿಸಿಬಿಟ್ಟಿದ್ದಾರೆ. ಆದರೆ ಈ ಬಿಲ್ಲಿನಲ್ಲಿ ಒಂದು ವಿಶಾಲಮನೋ ಭಾವನೆಯಿದ್ದಹಾಗೆ ಕಂಡುಬರುವುದಿಲ್ಲ. ಹೀಗೆ ಜನರಿಗೆ ವೃಥಾ ತೊಂದರೆ ಕೊಡಲು ಸರ್ಕಾರ ದವರು ಇಂಥ ಚಿಲ್ಲರೆ ಮಾರ್ಗಗಳನ್ನು ಹಿಡಿಯುತ್ತಿದ್ದರೆ ಜನರಿಂದ ಖಂಡಿತ ಇವರಿಗೆ ಒಳ್ಳೇ ಹೆಸರು ಬರುವುದಿಲ್ಲ. ಹತ್ತಾರು ವರ್ಷಗಳಿಂದ ಅಭ್ಯಾಸಮಾಡಿಕೊಂಡು ಬರುತ್ತಿರುವ ಮಕ್ಕಳುಗಳಿಗೆ ಹೀಗೆಲ್ಲ ತೊಂದರೆ ಕೊಡುವುದು ಸರ್ಕಾರಕ್ಕೆ ಉಚಿತವಾದುದಲ್ಲ. 'ಒಂದು ಕಣ್ಣಿಗೆ ಸುಣ್ಣ-ಒಂದು ಕಣ್ಣಿಗೆ ಬೆಣ್ಣೆ' ಹಾಕುವ ನೀತಿಯಲ್ಲಿ ಸರ್ಕಾರ ಎಂದಿಗೂ ಕೈ ಹಾಕಬಾರದು. ರಾಜ್ಯಾಂಗದಲ್ಲಿ ಇದಕ್ಕೆಲ್ಲಾ ಅವಕಾಶವಿಲ್ಲ. ಆದರೂ ಸರ್ಕಾರದವರು ಧೈರ್ಯಮಾಡಿ ತಪ್ಪು ಹೆಜ್ಜೆ ಇಟ್ಟಿದ್ದಾರಲ್ಲಾ! ಇದರಿಂದ ದೇಶದಲ್ಲಿರತಕ್ಕ ಜನರಿಗೆ ಇವರು ವಂಚನೆ ಮಾಡಿದಂತಾಗುವು ದಿಲ್ಲವೇ? ಇಂಥ ಮಸೂದೆಗಳಿಂದ ದೇಶದ ಜನರಿಗೆ ಕಲ್ಯಾಣವಾಗುವುದಿಲ್ಲ-ಇತ್ತ ಸರ್ಕಾರಕ್ಕೂ ಗೌರವ ಬರುವುದಿಲ್ಲ. ಈ ವಿಚಾರದಲ್ಲಾಗಲೇ ಸವಿಸ್ತಾರವಾಗಿ ವಿರೋಧಪಕ್ಷದ ನಾಯಕರಾದ ಶ್ರೀ ಮಲ್ಲಾರಾಧ್ಯರೂ, ಶ್ರೀ ಶ್ರೀನಿವಾಸಶೆಟ್ಟರೂ ಮತ್ತು ಶ್ರೀ ನರಸಿಂಹನ್ ರವರೂ ಹೇಳಿದ್ದಾರೆ. ಆದರೆ ಸರ್ಕಾರದವರಿಗೆ ಅವರ ಹಿತ ಹಿಡಿಸಿದಂತೆ ಕಾಣುತ್ತಿಲ್ಲ. ಇದು ಸರ್ಕಾರದವರಲ್ಲಿರತಕ್ಕ ಒರಟುತನವನ್ನು ತೋರಿಸುತ್ತದೆ. ಅರ್ಥಕ್ಕೆ ಅನರ್ಥ ಮಾಡಿ ಜನರಿಗೆ ತೊಂದರೆ ಕೊಡತಕ್ಕ ವಿಚಾರದಲ್ಲಿ ನಮಗಿಂತ ದಕ್ಷರಾದವರು ಬೇರೆಯಾರೂ ಇಲ್ಲವೆಂಬ ಹೆಮ್ಮೆಯಿಂದ ಸರ್ಕಾರದವರು ವರ್ತಿಸಿದ್ದೇ ಆದರೆ ಅವರ ಬುದ್ಧಿಯನ್ನು ನಾಳೆ ಜನರು ಬರಲಿರುವ ಚುನಾವಣೆಗಳ ಕಾಲದಲ್ಲಿ ಅಳತೆ ಮಾಡದೆ ಬಿಡುವುದಿಲ್ಲ. ಆಗಲಾದರೂ ಜನರು ಈ ಆಡಳಿತ ಪಕ್ಷವನ್ನು ದೇಶಕ್ಕೆ ದ್ರೋಹ ಮಾಡಿದವರು-ಅನ್ಯಾಯಮಾಡಿದವರು ಎಂಬ ತೀರ್ಮಾನವನ್ನು ಅವರು ಇವರಿಗೆ ತಿಳಿಸದೆ ಬಿಡುವು ದಿಲ್ಲ. ಇವರ ಅಧಿಕಾರದ ಅಮಲಿನಲ್ಲಿ-ಅಂಧಕಾರ ದರ್ಬಾರಿನಲ್ಲಿ ಇವರು ಅಡ್ಡದಾರಿ ಹಿಡಿದರೆ ಮುಂದೆ ಬೇರೊಂದು ಹೊಸ ಮಂತ್ರಿಮಂಡಲ ಬಂದು ಇದನ್ನೆಲ್ಲ ಮತ್ತೊಮ್ಮೆ ಸರಿಪಡಿಸಲು ಪ್ರಯತ್ನ ಮಾಡೇ ಮಾಡುತ್ತಾರೆ. ಆ ದೃಷ್ಟಿಯನ್ನಾದರೂ ಮಂತ್ರಿಗಳು ಗಮನದಲ್ಲಿಟ್ಟುಕೊಂಡು ಕೈಲಾದಮಟ್ಟಿಗೂ ದೇಶಕ್ಕೆ ಒಳ್ಳೆಯದನ್ನು ಮಾಡಿ ಒಂದು ಒಳ್ಳೆಯ ಹೆಸರನ್ನು ಪಡೆಯಲಿ, ಇದು ಅವರ ಅಖೈರು ಅವಧಿ. ಅವಸರದಲ್ಲಿ-ಆತುರಾತುರದಿಂದ ಮಾಡಿದ ಕೆಲಸಗಳ ಬಗ್ಗೆ ಹೆಮ್ಮೆ ಪಡುವಕಾಲ ಹೋಯಿತು.

ಉಪಾಧ್ಯಕ್ಷರು.—ಈಗ ಈ ಬಿಲ್ಲಿನಲ್ಲಿರತಕ್ಕ ಲೋಪ-ದೋಷಗಳೇನಿವೆ ಅವುಗಳನ್ನು ಮಾತ್ರ ತಿಳಿಸಿ?

ಶ್ರೀ ಸಿ. ಜೆ. ಮುಕ್ಕಣ್ಣಪ್ಪ.—ನಾವು ಸರ್ಕಾರದವರ ಲೋಪದೋಷಗಳನ್ನು ಕಳೆದ 5 ವರ್ಷ ಗಳಿಂದ ಒಂದೇಸಮನಾಗಿ ಹೇಳುತ್ತ ಬಂದಿದ್ದೇವೆ. ಆದರೆ ಅದರಿಂದೇನೂ ಅಂಥ ಪ್ರತಿ ಫಲ ವಾದಂತೆ ಕಾಣುಬರುತ್ತಿಲ್ಲ. ಕಾರಣ ವೇನೆಂದರೆ ಅದಕ್ಕಾಗಿ ಈಗ ಇವರೆಲ್ಲರೂ ಅ ಡೆಲ್ಲಿಯ ಕಡೆಗೆ ಆ ಗಂಗಾನದಿ ಹಿಂದೂ ಮಹಾಸಾಗರಕ್ಕೆ ಪ್ರವಾಹವನ್ನು ಹೊತ್ತು ಹೋಗುದಂತೆ ಇವರ ಪ್ರವಾಹ ಹರಿಯಲು ಪ್ರಾರಂಭವಾಗಿದೆ. ಇವರು ಆಚರಣೆಯಲ್ಲಿ ಒಂದು ಕಣ್ಣಿಗೆ ಸುಣ್ಣ-ಒಂದು ಕಣ್ಣಿಗೆ ಬೆಣ್ಣೆ ಹಾಕತಕ್ಕ ಕೆಲಸ ಮಾಡುತ್ತಿದ್ದಾರೆ.

ಶ್ರೀ ವೈ. ವೀರಪ್ಪ (ಹೊಳೆನರಸಿಪುರ).—ಆ ಬೆಣ್ಣೆ-ಸುಣ್ಣಗಳೂ ಸಹ ಔಷಧಿಯಾಗಿ ಕೆಲವು ಸಂದರ್ಭಗಳಲ್ಲಿ ಉಪಯೋಗಿಸಲ್ಪಡುತ್ತವೆ.

ಶ್ರೀ ಸಿ. ಜೆ. ಮುಕ್ಕಣ್ಣಪ್ಪ.—ಮದ್ರಾಸಿನಲ್ಲಿ G. C. M. ಪಾಸ್ ಮಾಡಿದವರಿಗೇ ಒಂದು ಮೈಸೂರಿನಲ್ಲಿ G. C. M. ಪಾಸ್ ಮಾಡಿದವರಿಗೇ ಒಂದು ಮತ್ತು ತುಂಗಭದ್ರದಲ್ಲಿ G. C. M. ಪಾಸ್ ಮಾಡಿದವರೇ ಒಂದು ತರಹೆ ಇನ್ನು ಕೆಲವರಿಗೆ ಎಗ್‌ಜಂಪ್ಷನ್-ಹೀಗೆಲ್ಲ ಒಬ್ಬರಿಗೊಂದು

(ಶ್ರೀ ಸಿ. ಜೆ. ಮುಕ್ಕಣ್ಣಪ್ಪ)

ಇನ್ನೊಬ್ಬರಿಗೊಂದು ಟ್ರೀಟ್‌ಮೆಂಟ್ ಕೊಡುತ್ತಿದ್ದಾರಲ್ಲ—ಏಕೆ ಎಂತ ಕೇಳುತ್ತೇನೆ ? ಇದನ್ನೆಲ್ಲ ಚುನಾವಣೆಯಾದ ಮೇಲೆ ತರುವುದಕ್ಕೆ ಸಾಧ್ಯವಿರಲಿಲ್ಲವೇ? ಸರಿಯಾದ ಅರ್ಹತೆಗಳಿಲ್ಲದಿರುವವರಿಗೆಲ್ಲ ಪರವಾನಗಿ ಕೊಟ್ಟಿದ್ದೇವೆಂದು, ನಿಮಗೆ ಕ್ಯಾನ್‌ವಾಸ್ ಮಾಡಿಸಲು ಹೊರಟಿದ್ದೀರಿ ಎಂದು ಕಾಣುತ್ತದೆ. ಹಿಂದೆ ಈ ಮಸೂದೆ ಚರ್ಚೆಗೆ ಬಂದಾಗ ಮುಖ್ಯಮಂತ್ರಿಗಳು ಇವರಿಗೆ ಒಂದು Compliment ಕೊಟ್ಟರು. He is a duly qualified doctor He knows much better than anybody in this house ಎಂದು ಹೇಳಿದರು. ಈ ಮಸೂದೆಯು ಕಾನೂನು ಆದಾಗ ತಮಗೆ ಕೀರ್ತಿ ಕಳಶ ಬರಬೇಕು.

ಇದರೊಳಗೆ ಶ್ರೀಮಾನ್ ನರಸಿಂಹನ್‌ರವರು ಹೇಳಿದ ಹಾಗೆ 65% ಆಯುರ್ವೇದ, 35% Allopathy ವಿಷಯವಿದೆ. ಶುದ್ಧಾಯುರ್ವೇದವಿರಬೇಕು. ಈ ಹಿಂದೆ ಶ್ರೀಮಾನ್ ಮಲ್ಲಾರಾಧ್ಯರು ಹೇಳಿದ ಸಿದ್ಧ ಕಲ್ಪಮಕರಧ್ವಜ ಗುಳಿಗೆಗಳು ಆಯುರ್ವೇದ ಶಾಸ್ತ್ರದ ರೀತ್ಯಾ, ಹಿಂದೂಸ್ಥಾನದಲ್ಲಿರುವಂಥ ಆಯುರ್ವೇದಕ್ಕೆ ಸಂಬಂಧಪಟ್ಟ ಶಾಸ್ತ್ರದ ಆಧಾರದ ಮೇಲೆ ತಯಾರಿಸಿದಂಥ ಗುಳಿಗೆಗಳಾಗಿವೆ. ನಮ್ಮ ಮಂತ್ರಿಗಳಿಗೆ ಮಕರಧ್ವಜಗುಳಿಗೆ, ಬಕರ ಧ್ವಜಗುಳಿಗೆ ಎಂದರೆ ಏನು ಎನ್ನುವುದು ಗೊತ್ತಿದೆಯೇ? ಇವರಿಗೆ ಶುದ್ಧ ಆಯುರ್ವೇದ ಮತ್ತು ಅಲೋಪಥಿ ಸೇರಿಸಿರುವ ಆಯುರ್ವೇದ ಇವುಗಳಿಗೆ ಇರುವ ವ್ಯತ್ಯಾಸ ಗೊತ್ತಿದೆಯೇ?

Sri M. C. NARASIMHAN.—You say that in this course, Allopathy constitutes only 35 per cent; is it true?

Sri K. K. HEGDE.—This has been discussed by the people concerned and it is said that Allopathy in L. A. M. C. is 65 per cent and this is 35 per cent and the curriculum has to be so framed as to give more prominence to Ayurveda. Allopathy side is only to assist so that Ayurveda could be developed.

ಶ್ರೀ ಸಿ. ಜೆ. ಮುಕ್ಕಣ್ಣಪ್ಪ.—Definitions ನಲ್ಲಿ "integrated system of medine" or integrated system means "a conjoint study, training and practice in indigenous medicine and modern medicine;" ಎಂದು ಹೇಳಿದ್ದೀರಿ. ನಿಮ್ಮಲ್ಲಿ ಯಾರಿಗೋ ಸಹಾಯವಾಗಬೇಕೆಂದು ಇದನ್ನು ವ್ಯತ್ಯಾಸಮಾಡಲು ಹೊರಟಿದ್ದೀರಿ. ಈ ತರಹ ವ್ಯತ್ಯಾಸಮಾಡುವುದು ನಿಮಗೆ ತರವಲ್ಲವೆಂದು ನಾನು ಹೇಳಿದೆ. G.F.A.M. ಪಾಸ್ ಮಾಡಿದವರು integrated medicine ತೆಗೆದುಕೊಳ್ಳಬಹುದು ಎಂದು ಒಪ್ಪಿಕೊಂಡಿದ್ದೀರಿ. G.C.A.M. ನವರಿಗೆ 'ಇಲ್ಲ' ಎಂದು ಹೇಳಿದ್ದೀರಿ. ಇದಕ್ಕೆ ಕಾರಣವೇನು? ಇವರಿಗೆ ಯಾರೂ ಹೇಳುವವರು, ಕೇಳುವವರು ಇರಲಿಲ್ಲವೇ ಎಂದು ಕೇಳುತ್ತೇನೆ; ಈ ರೀತಿಯ ವ್ಯತ್ಯಾಸವನ್ನು ಏಕೆ ಮಾಡುತ್ತಿದ್ದೀರಿ ಲೋಪ ದೋಷ ಏಕೆ ಇರಬೇಕು ಎಂದು ಕೇಳುತ್ತೇನೆ. ಮಂತ್ರಿಮಂಡಲದಲ್ಲಿ ಯಾರೋ ಬೇಕಾದವರಿದ್ದರು ಎಂದು, ಅವರಿಗೆ ಸಹಾಯಮಾಡಲು G.F.A.M. ಆಗಿರುವವರಿಗೆ integrated medicine ನಲ್ಲಿ ಪ್ರಾಕ್ಟೀಸ್ ಮಾಡಲು ಅವಕಾಶಕೊಟ್ಟು G.C.A.M. ಆದವರಿಗೆ ಆ ಸಾಲಭ್ಯ ಬೇಡವೆಂದು ಹೇಳುವುದು ನ್ಯಾಯವೇ? ಇವರಿಗೆ ಬೇಕಾದವರೂ ಇಬ್ಬರು ಮಂತ್ರಿಗಳು ಇದ್ದಿದ್ದರೆ ಅವರು ಈ ಜನರ career ಹಾಳಾಗುತ್ತದೆಂದು ತಿಳಿದಿದ್ದರೆ ಆಗ ಏನು ಮಾಡುತ್ತಿದ್ದಿರಿ? ಕಾನೂನು ಮಾಡುವಾಗ ನಿಮ್ಮ ಮಕ್ಕಳಿಗೆ ಏನು ಹಕ್ಕಿದೆಯೋ, ಅವರಿಗೆ ಏನು rights confirm ಮಾಡುತ್ತೀರೋ ಅದೇ ರೀತಿ ನಮ್ಮ ಮಕ್ಕಳಿಗೂ rights confirm ಮಾಡುವುದಕ್ಕೆ ಅವಕಾಶವಾದಿ ಎಂದರೆ, ಇಬ್ಬರಿಗೂ ಒಂದೇ qualification ಇದ್ದರೆ, ಒಬ್ಬರಿಗೊಂದು, ಇನ್ನೊಬ್ಬರಿಗೊಂದು ಮಾಡಿ ಒಬ್ಬನನ್ನು ಮೇಲಕ್ಕೆತ್ತಿ ಇನ್ನೊಬ್ಬನನ್ನು ಕೆಳಕ್ಕೆ ಹಾಕುತ್ತೇವೆ

ಎನ್ನುವುದು ನ್ಯಾಯವಲ್ಲ, ಈ ರೀತಿ discriminations ಮಾಡಬಾರದು, ಇದರಿಂದ ಒಳ್ಳೆಯ ದಾಗುವುದಿಲ್ಲವೆಂದು ಹೇಳಲು ಇಷ್ಟು ಸುದೀರ್ಘವಾಗಿ ಮಾತನಾಡಬೇಕಾಗಿದೆ. Integrated medicine ಎನ್ನುವುದಕ್ಕೆ ಅರ್ಥವಿವರಣೆಯು ಕೆಳಗೆ ಕೊಟ್ಟಿರುವ explanation ನಲ್ಲಿ ಶುದ್ಧ ಆಯುರ್ವೇದ ಬೆಳೆಯುವುದಕ್ಕೆ ಧಕ್ಕೆ ಇದೆಯೋ ಇಲ್ಲವೋ ಎಂಬುದನ್ನು ಹೇಳಿ. ಶುದ್ಧ ಆಯುರ್ವೇದ ಬೆಳೆಸುವವರು ಇದನ್ನು ಹಾಕಬಾರದಾಗಿತ್ತು. ಪರಿಶುದ್ಧವಾದ ಹಾಲಿಗೂ, ನೀರು ಬೆರಸಿದ ಹಾಲಿಗೂ ವ್ಯತ್ಯಾಸವಿದೆ. ನೀರು ಬೇರಸಿದ ಹಾಲು ಮಾರುವವನಿಗೆ ಶಿಕ್ಷೆಯಾಗುತ್ತದೆ; ಒಳ್ಳೆಯ ಹಾಲು ಮಾರುವವನಿಗೆ ಶಿಕ್ಷೆಯಾಗುವುದಿಲ್ಲ. ಏಕೆ? ಹಾಗೆಯೇ ಶುದ್ಧ ಆಯುರ್ವೇದ ವಿಷಯವೂ ಆಗಿದೆ. ಒಂದೇ qualification ಇದ್ದು ಒಂದೇ ವಿಷಯ ಓದಿರುವವರಲ್ಲಿ ಒಬ್ಬರಿಗೊಂದು, ಮತ್ತೊಬ್ಬರಿಗೊಂದು ಮಾಡಿರುವುದು ಸರಿಯಲ್ಲ. ಆದ್ದರಿಂದ ತಾವು ಸ್ವಲ್ಪ ದೀರ್ಘವಾಗಿ ಯೋಚನೆಮಾಡಬೇಕು ಎಂದು ತಮಗೆ ಹೇಳುತ್ತಿದ್ದೇನೆ. Integrated system of medicine ಎಂದು 65% ಆಯುರ್ವೇದ, 35% modern medicine ಕಲಸುವ ಬದಲು ಶುದ್ಧ ಆಯುರ್ವೇದ ಬೆಳೆಯಲು ಪ್ರಯತ್ನಮಾಡಿ ಎಂದು ನಾನು ಹೇಳುತ್ತೇನೆ.

"Practitioner" means a person who practises any system of medicine as his principal occupation; ಎಂದು ಹೇಳಿದೆ. ಇದಕ್ಕೆ ಅರ್ಥವೇನು ಸ್ವಾಮಿ? ಅಳಲೆಕಾಯಿ ಪಂಡಿತನೂ ಒಂದೇ, ವಿದ್ಯಾರ್ಹತೆಯನ್ನು ಗಳಿಸಿರುವವನೂ ಒಂದೇ, ಮೇಜಿನ ಮೇಲೆ ಹೆಣವನ್ನು ಹಾಕಿ ಕುಯ್ಯುವವನೂ ಒಂದೇ ಎಂದು ಅರ್ಥವೇ ಎಂದು ನಾನು ಕೇಳುತ್ತೇನೆ.

I feel that the Cabinet is creating confusion in the minds of the members. We are not able to know what exactly they mean by this. ಇದರಲ್ಲಿ ಅರ್ಥವೇನು ಹೇಳಿ. ಸೆಲೆಕ್ಟ್ ಕಮಿಟಿಯಲ್ಲಿ ಇದರೊಳಗೆ ಏನಿದೆ ಎನ್ನುವುದನ್ನು ಗಮನಕ್ಕೆ ತರದೆ ತಿದ್ದುಪಡಿ ಮಾಡಿದ್ದೀರಿ. ಈ ರೀತಿ 'ಜುಲುಂಕೆ ರಾಮ್‌ರಾಮ್' ಎನ್ನುವಂತೆ ಮಾಡುವುದು ಸರಿಯಲ್ಲವೆಂದು ಹೇಳುತ್ತೇನೆ.

5-30 P.M.

[Mr. Speaker in the Chair.]

ಅದಕ್ಕೋಸ್ಕರವಾಗಿಯೇ ನಮ್ಮ ಮೇಲೆ ಇವರು ಒತ್ತಾಯ ಮಾಡುತ್ತಿದ್ದಾರೆ. ಇವರೇನು, ಶತಕಂಠರಾವಣರೋ, ದಶಕಂಠರಾವಣರೋ ಗೊತ್ತಾಗಲಿಲ್ಲ. ಈಗಾಗಲೇ ಅಧಿಕಾರಕ್ಕೋಸ್ಕರ ವಾಗಿ ಟಿಕೆಟ್ಟಿಗೆ ಕಾದುಕೊಂಡು ಒಬ್ಬರಿಗೊಬ್ಬರು ಹೊಡೆದಾಡುತ್ತಿದ್ದಾರೆ. ಈ ರೀತಿ ಮನಸ್ಸಾ ಇಚ್ಛೆ ಮನಸೂದೆಗಳನ್ನು ಮಾಡುವುದು ನ್ಯಾಯವಲ್ಲ. ಇವರೇನು ನಿಜವಾಗಿ ಅತಿರಥ ಮಹಾ ರಥರ ಹಾಗೇನೂ ಇಲ್ಲ. ನಾನು ಈ ಕಡೆಯವರೆಗೂ ಮತ್ತು ಆ ಕಡೆಯವರೆಗೂ ಒಂದು ಮಾತನ್ನು ಹೇಳುತ್ತೇನೆ. ಇದರಲ್ಲಿರುವ ತಪ್ಪುಗಳನ್ನು ಚೆನ್ನಾಗಿ ಗಮನಿಸಿ ಎಂದು ಹೇಳುತ್ತೇನೆ. ಈ ರೀತಿ ಮಾಡುವುದು ಸರಿಯಲ್ಲ. ಈ ಬಿಲ್ಲಿನೊಳಗೆ practitioner means a person who practises any system of medicine ಎಂದು ಹೇಳುತ್ತಾರೆ. ಹಾಗೆ ಮುಂದಕ್ಕೇ ನೋಡುತ್ತಾ ಹೋದರೆ the integrated system of medicine ಎಂದು ಬೇರೆ ಹೇಳುತ್ತಾರೆ. ಒಂದಕ್ಕೊಂದಕ್ಕೆ ಸರಿಯಾದ ಅರ್ಥವೇ ಬರುವುದಿಲ್ಲ. ದಯಮಾಡಿ ಇದರಲ್ಲಿರತಕ್ಕ ಲೋಪದೋಷಗಳನ್ನು ಒಪ್ಪಿಕೊಳ್ಳಿ ಎಂದು ಆ ಕಡೆಯವರಿಗೆ ಹೇಳುತ್ತೇನೆ. ಹಿಂದೆ ಒಂದು ಸಾರಿ ಮುಖ್ಯಮಂತ್ರಿಗಳು ನಾವೆಲ್ಲರೂ ಕೊನೆಯ ದಿವಸ ಹೋಗುವಾಗ ಅಣ್ಣತಮ್ಮಂದಿರ ಹಾಗೆ ಒಳ್ಳೆಯ ಮಾತುಗಳನ್ನಾಡಿಕೊಂಡು ಹೋಗಬೇಕು ಎಂದು ಹೇಳಿದ್ದಾರೆ. ಆದ್ದರಿಂದ ಇದರಲ್ಲಿರತಕ್ಕ ಲೋಪದೋಷಗಳನ್ನು ಒಪ್ಪಿಕೊಳ್ಳಿ ಎಂದು ಹೇಳುತ್ತಿದ್ದೀರಿ.

ಶ್ರೀ ಜೆ. ಬಿ. ಮಲ್ಲಾರಾಧ್ಯ.—ನಾವು ಒಪ್ಪಿಕೊಂಡಿಲ್ಲ.

ಶ್ರೀ ಸಿ. ಜೆ. ಮುಕ್ಕಣ್ಣಪ್ಪ.—ನಾನೂ ಸಹ ಒಪ್ಪಿಕೊಂಡಿಲ್ಲ. ನೀವು ಅಪಥ್ಯ ಮಾಡಿಕೊಳ್ಳಬೇಡಿ. ನಾವು ಕೊಡತಕ್ಕ ಈ ಗುಳಿಗೆಗಳನ್ನು ತೆಗೆದುಕೊಂಡು ಈ ಕಾಯಿಲೆ ವಾಸಿಮಾಡಿಕೊಳ್ಳಿ ಎಂದು ನಾನು ಹೇಳುತ್ತೇನೆ.

ಅಧ್ಯಕ್ಷರು.—ಸದಸ್ಯರು ಯಾವು ಯಾವುದೊ ಹೇಳುತ್ತಿದ್ದಾರೆ. ಈ ಮಸೂದೆ ಈಗಾಗಲೇ ಸೆಲೆಕ್ಟ್ ಕಮಿಟಿಯಿಂದ ಬಂದಿದೆ. ಕನ್ಸಿಡರೇಷನ್ ಸ್ಟೇಜ್ ಎಲ್ಲಾ ಮುಗಿದಿದೆ. ಅದನ್ನೆಲ್ಲಾ ಮತ್ತೊಂದು ಸಾರಿ ಈಗ ಕೈ ಹಚ್ಚಿದರೆ ಹೇಗೆ?

ಶ್ರೀ ಸಿ. ಜೆ. ಮುಕ್ಕಣ್ಣಪ್ಪ.—ನಾನೇನು ಗೋಕುಲಾಷ್ಟಮಿಗೂ ಇಮಾಂಸಾಬರಿಗೂ ಸಂಬಂಧವೇನು ಮಾಡುತ್ತಿಲ್ಲ.

ಅಧ್ಯಕ್ಷರು.—ನಾನು ತಮಗೆ ಹೇಳುವುದಿಷ್ಟೆ. ಈಗ ಈ ಮಸೂದೆ ಸೆಲೆಕ್ಟ್ ಕಮಿಟಿಯಿಂದ ಒಂದು ವರದಿಯೊಡನೆ ಬಂದಿರುವಾಗ ಆ ಒಂದು ಸ್ಕೋಪಿನ ಮೇಲೆ ಮಾತ್ರ ಅವರು ಮಾತನಾಡಬೇಕು. ಪ್ರಾಕ್ಟಿಷನರ್ ಕ್ವಾಲಿಫಿಕೇಷನ್, ಎಗ್ಸಾಮಿನೇಷನ್, ರಿಜಿಸ್ಟರ್ಡ್ ಪ್ರ್ಯಾಕ್ಟಿಷನರ್–ಈ ಪ್ರಶ್ನೆಗಳಾವುದೂ ಇದರಲ್ಲಿ ಬರುವುದಿಲ್ಲ. ಕ್ಲಾಜ್ 16ರಲ್ಲಿ ಏನೇನೂ ಬದಲಾವಣೆಯಾಗಿಲ್ಲ. ಆ ಬಗ್ಗೆ ಅವರು ಕನ್ಸಿಡರೇಷನ್ ಸ್ಟೇಜಿನಲ್ಲಿ ಮಾತನಾಡಿದ ಹಾಗೆ ಇಲ್ಲಿಯೂ ಮಾತನಾಡುವುದಕ್ಕಾಗುವುದಿಲ್ಲ. ಮುಖ್ಯವಾಗಿ ಅವರು ಈ ಮಸೂದೆ ಸೆಲೆಕ್ಟ್ ಕಮಿಟಿಯಿಂದ ಬಂದಮೇಲೆ ಏನಾದರೂ ಬದಲಾವಣೆಗಳನ್ನು ಮಾಡಿದ್ದರೆ ಅದರಿಂದೇನಾದರೂ ತೊಂದರೆಗಳಾವುದಾದರೆ ಆ ಬಗ್ಗೆ ಹೇಳಬೇಕು.

ಶ್ರೀ ಸಿ. ಜೆ. ಮುಕ್ಕಣ್ಣಪ್ಪ.—ಈ ಮಸೂದೆಯ ಕ್ಲಾಜು 33 ಮತ್ತು 34ರಲ್ಲಿ ಸ್ವಲ್ಪ ಜನರ ಮನಸ್ಸನ್ನು ಕಳವಳ ಮಾಡುವಂತಿದೆ. ಕೆಲವು ಬದಲಾವಣೆಗಳು ಆಗಿರುವುದು ಸರಿಯಲ್ಲ. ಅದರ ಬಗ್ಗೆ ಏನು ಮಾತನಾಡುವುದಕ್ಕೂ ಸ್ಕೋಪ್ ಕಡಮೆ ಇದೆ. ಅದಕ್ಕಾಗಿ ಈಗಲಾದರೂ ಸರ್ಕಾರದವರು ಮನಸ್ಸು ಮಾಡಿ ಒಂದು ಓರಲ್ ಅಮೆಂಡ್‌ಮೆಂಟನ್ನು ತರಲಿ ಎಂದು ನಾನು ಹೇಳುತ್ತೇನೆ.

ಅಧ್ಯಕ್ಷರು.—34ನೇ ಕ್ಲಾಜಿಗೆ ಅಮೆಂಡ್‌ಮೆಂಟ್ ಬಂದಾಗ ಅದರ ವಿಷಯ ಮಾತನಾಡಿ ಈಗ ಕ್ಲಾಜು ಮೇಲೆ ಮಾತನಾಡಿ. ಸೆಲೆಕ್ಟ್ ಕಮಿಟಿಯಿಂದ ಬಂದಮೇಲೆ ವಿಶೇಷವಾಗಿ ಮಾತನಾಡುವುದಕ್ಕೆ ಸ್ಕೋಪ್ ಇರುವುದಿಲ್ಲ. ಅದು ಸ್ವಲ್ಪ ಕಷ್ಟವಿದೆ.

ಶ್ರೀ ಸಿ. ಜೆ. ಮುಕ್ಕಣ್ಣಪ್ಪ.—ಸರಿ. ತಾವು ಈ ರೀತಿ ರೂಲಿಂಗ್ ಕೊಟ್ಟಮೇಲೆ ಒಪ್ಪಬೇಕು. ಇನ್ನು 23ನೇ ಕ್ಲಾಜಿನಲ್ಲಿ ಕೆಲವು ಅಂಶಗಳನ್ನು ತೆಗೆದುಹಾಕಿದ್ದೀರಿ. ಸೆಲೆಕ್ಟ್ ಕಮಿಟಿಯಿಂದ ಬಂದಮೇಲೆ ಕೆಲವು ತಿದ್ದುಪಡಿಗಳನ್ನು ತಂದಿದ್ದೀರಿ. ಸೆಲೆಕ್ಟ್ ಕಮಿಟಿಯಲ್ಲಿ ಏತಕ್ಕೋಸ್ಕರ ಈ ಬಗ್ಗೆ ಚರ್ಚೆ ಮಾಡಲಿಲ್ಲವೆಂದು ನಾನು ಕೇಳುತ್ತೇನೆ. ಈ ಕ್ಲಾಜಿನ ಬಗ್ಗೆ ತಿದ್ದುಪಡಿ ತಂದಿರುವುದು ಸೆಲೆಕ್ಟ್ ಕಮಿಟಿಯವರಿಗೆ ಗೊತ್ತಿದ್ದರೂ ಅದನ್ನು ಚರ್ಚೆ ಮಾಡದೇ ಇರಲು ಕಾರಣವೇನು? ಸರ್ಕಾರಕ್ಕೆ ಮುಂದಾಲೋಚನೆ ಇರಲಿಲ್ಲವೇ ಎಂದು ಪ್ರಶ್ನೆ ಮಾಡಬೇಕಾಗಿದೆ. ಇದನ್ನು ನೋಡಿದರೆ ಸರ್ಕಾರ ಆಡಳಿತ ಮಾಡುವುದಕ್ಕೆ ಸರಿಯಾದ ದಾರಿ, ಮಾರ್ಗ ಹಿಡಿಯಲಿಲ್ಲವೆಂದು ಹೇಳಬೇಕೋ ಬೇಡವೊ! ನೀವು ನಮ್ಮ ಮುಂದೆ ಸೆಲೆಕ್ಟ್ ಕಮಿಟಿ ವರದಿಯನ್ನು ಕೊಟ್ಟಮೇಲೆ ಈ ತಿದ್ದುಪಡಿಯನ್ನು ಅಲ್ಲಿ ಚರ್ಚೆಗೆ ತರಲಿಲ್ಲವೇ? ಏನೇ ಆಗಲಿ ನನಗೆ ತಿದ್ದುಪಡಿಯ ಮೇಲೆ ಮಾತನಾಡುವುದಕ್ಕೆ ಸಾಕಷ್ಟು ಅವಕಾಶ ಕೊಡಬೇಕು. ಇದುವರೆಗೆ ನಾನು ಹೇಳಿದ್ದನ್ನು ಸರ್ಕಾರ ತೀವ್ರವಾಗಿ ಯೋಚನೆ ಮಾಡಿ ಒಪ್ಪಿಕೊಳ್ಳಬೇಕೆಂದು ನಾನು ಹೇಳುತ್ತೇನೆ.

ಇಷ್ಟನ್ನು ಹೇಳಿಬಿಟ್ಟು ಈ ಮಂತ್ರಿಮಂಡಲದವರು ಈ ಬಿಲ್ಲನ್ನು ತಂದು ಇದರಲ್ಲಿ ಹೇಳಿರುವಂತೆ G.C.A.M· ಮತ್ತು L.A.M.S. ಎಂದು ಪದವಿಗಳನ್ನು ಪಡೆದಿರುವವರಿಗೆ ಒಂದು ಕಣ್ಣಿಗೆ ಬೆಣ್ಣೆ ಮತ್ತು ಒಂದು ಕಣ್ಣಿಗೆ ಸುಣ್ಣ ಎನ್ನುವಂತೆ ವ್ಯತ್ಯಾಸ ಮಾಡದೇ, ಅಂತಹ ವ್ಯತ್ಯಾಸಗಳಿದ್ದರೆ ಅದನ್ನು ಸ್ವಲ್ಪ ತ್ಯಾಜ್ಯ ಮಾಡಿ ತಾವು ಎಲ್ಲಾ ಮಕ್ಕಳಿಗೂ ಅನುಕೂಲವಾಗುವಂತೆ

ಈ ಬಿಲ್ಲನ್ನು ಮಾಡಬೇಕೆಂದು ಹೇಳುತ್ತೇನೆ. ಅಲ್ಲದೆ ಇದರಲ್ಲಿ ಕೆಲವರು ಅವರ ಬಂಧುಗಳು, ಎಂದರೆ, ಅವರ ಭಾವಮೈದುನರು, ಅಕ್ಕನಗಂಡಂದಿರು, ಇತ್ಯಾದಿ ಕೆಲವರು ಡಾಕ್ಟರುಗಳಾಗಿದ್ದಾರೆಂದು ಅವರಿಗೆ ಅನುಕೂಲ ಮಾಡುವುದಕ್ಕೆ ಹೋಗಬೇಡಿ. ಎಲ್ಲಾ ಮಕ್ಕಳಿಗೂ ಅನ್ಯಾಯವಾಗದ ರೀತಿಯಲ್ಲಿ ಮಾಡುವುದು ಉತ್ತಮ. ಯಾವಾಗಲೂ ಒಂದು ಕಾನೂನನ್ನು ಮಾಡುವಾಗ ಸ್ವಲ್ಪ ದಯೆ ತೋರಿಸಿ ಅನ್ಯಾಯವಾಗದಂತೆ ಮಾಡಬೇಕು. ಆ ರೀತಿಯಾದ ಕರುಣೆಯನ್ನು ಈ ಬಿಲ್ಲನ್ನು ಅನ್ವಯಿಸುವ ಮಕ್ಕಳಿಗೂ ತೋರಬೇಕು ಎಂದು ಹೇಳಿ ನಾನು ಕುಳಿತುಕೊಳ್ಳುತ್ತೇನೆ.

†Sri K. K. HEGDE.—Mr. Speaker Sir, as regards the comments on the Bill, I should say it is mainly centred round the point that facility should be given to the G.C.A.M. people to practise in both systems.It is true Sir that in the original Bill that we did not specify the categories in the integrated system. Sir, when we bring in such a legislation, we thought it is best to be as liberal as possible and at least in the future set up, we may allow this type of integrated system of people to practice both systems. The policy of the Government is to encourage Ayurveda pure and simple. With that idea, in future the intention of the Government is to prevent such integrated systems of medicines in this State. With that idea, as I have already said, the Government constituted a committee with our Chief Minister as Chairman and they submitted a report saying that we should have only Sudha Ayurveda. When they made that idea to develop Sudha Ayurveda, we thought that we should give them some elemental knowledge of Anatomy and Physiology. With that intention the curriculum was framed and boys were admitted into the college from 1957 on wards. The 1957 batch of students complain that they were not aware of this curriculum and the intention of the Government and they made some representation. After going through the whole procedure, because they were not aware of this prohibition, Government thought that they should be given the option to appear to the LAMS if they so chose to do. Later it has been made known to them that they should practice only Ayurveda and as such I do not see any reason why we should the GCAM people to be categorised under the integrated system.

Then, Sir, it is said that Government have allowed the products of the Taranath Vidya Peetha to practise the integrated system. It is not with the idea that they were in any way superior to the G.C.A.M. But when we formulate or bring in a legislation of this type, at the first instance I think it is the intention of the Government and the committee to be as liberal as possible and as such all these 18 or 19 categories have been included in the integrated system because they have been practicing both systems in the State already.

My friend Sri M. C. Narasimhan said, why should people of five years standing be compelled to register themselves when a man of ten years standing need not register ? The reason is, a man who has practised only for five years may not be competent. So, we said that

(Sri K. K. HEGDE)

he should undergo an examination stipulated by the Board and if he fails in that examination, he must be prohibited from practicing.

Then again my friend referred to 'family medicine' where the philanthropic people give medicine free of charge. I think it is not possible to legislate for such persons who are doing free treatment in home drugs. It is a question concerning the conviction and belief of the people; and Government thought that it is not proper to restrict them. It is a matter of some confidence and if the patient takes it with belief, it is not proper to restrict such people. So, they have been excluded under 34.

Sir, again Mr. Narasimhan said that the schedule does not have the same force as the provisions in the Act. The Law Department have opined that the schedule had got an equal force, as much as the provision in the Act itself.

With these remarks, I appeal to the House to consider this report as passed by the Joint Select Committee.

†Sri J. B. MALLARADHYA.—The Hon'ble Minister has not answered my point. I made an appeal that the present batch of students in view of the fact that there was no written agreement and in view of the fact that they were not definitely told that they will not be allowed to practice Allopathy, I said that the operation of this law should not be made applicable to those students. If necessary, from the academic year 1962, if you issue a notification and take an agreement from the intending candidates that they will practice only Sudha Ayurveda although they may have a medium of Allopathic training. I made an appeal both to the Health Minister and also the Chief Minister. I wanted the legal aspect of it also to be examined, because we should be clear on the point whether it would not operate as a discrimination. In the case of the 19 categories of people, you have said that although they have only 10 per cent of Allopathy, they can practice the integrated system, whereas these people who have learnt so much of Allopathy, are not to be permitted to practice the same integrated system. Whether this will not operate as a legal discrimination. That is the point which we wanted my friend to examine before finally taking a decision. That aspect has not been touched upon by the Hon'ble Minister Sir.

†Sri K. K. HEGDE.—I have already answered this when Sri Mallaradhya raised this point. In 1957 a Committee was appointed to go into this question. The Committee held the view and Government endorsed it that we should have a Sudha Ayurveda College and so boys admitted from 1957 onwards have been informed about this. But the boys admitted in 1957 had no information about this decision because this decision was taken two months after they joined the college. So when their problem was brought to the notice of Government, we found

some justification in their point and so we allowed them to appear for the LAMS course. Later boys have been told that they are expected to practise only Ayurveda and so it is not possible for us to extend this facility to them. If we go on extending this facility like this, there will no fainality to this.

Mr. SPEAKER.—The question is :

"The Mysore Ayurvedic and Unani Practitioners' Registration and Medical Practitioners' Miscellaneous Provisions Bill, 1960, as reported by the Select Committee be taken into consideration."

*The motion was adopted.*

Mr. SPEAKER.—The question is :

Clauses 2 to 19 both inclusive stand part of the Bill.

*The motion was adopted.*

Clauses 2 to 19 both inclusive were added to the Bill.

*Clause* 20

Sri K. K. HEGDE.—I beg to move :

"That in Clause 20, para (3) shall be deleted."

Mr. SPEAKER.—Amendment moved :

"That in Clause 20, para (3) shall be deleted."

† Sri K. K. HEGDE.—Sir, when appointments are made the qualifications will be stipulated and as such it is not necessary to say that they are eligible to hold such and such a post. Moreover sub-clause (5) of this clause dealing with the same point has been omitted by the Select Committee since sub-clause (3) and sub-clause (5) are inter-related, sub-clause (3) is sought to be deleted.

† Sri V. SRINIVASA SHETTY.—The original conception of the Bill was to treat GCAMS and LAMS as a separate category and to give them special treatment by sub-clause (5). The original sub-clause (5) said that "registered practitioners holding the diploma of Licentiate in Indigenous Medicine and LAMS shall be competent to hold any appointment as physician, surgeon......" They were found eligible to hold appointments specially and not others. Now there is a third category of practitioners under the heading integrated medicine and along with these two categories 17 other categories are clubbed together. So these two categories of gentlemen brought pull and pressure and the whole Bill has been changed to suit them. I know the whole history. I find that every now and then the scheme of the Bill is going on changing yielding to some pressure or the other. This principle which is sought to be introduced is something with which I personally cannot agree. I strongly oppose this amendment.

Sri J. B. MALLARADHYA.—At the time when the Select Committee considered the Bill this point was never brought to its notice. I do not know what are the special circumstances necessitating this amendment now.

Sri K. K. HEGDE.—It was agreed in the Select Committee that this should be deleted.

Sri J. B. MALLARADHYA.—Possibly this decision was taken when I was not present. So I have a right to speak on it.

Sri C. J. MUCKANNAPPA.—I rise to a point of order. The Minister said that the other members of the Select Committee agreed to the deletion of this. May I know then why it has not found a place in the report?

Sri K. K. HEGDE.—It is an unfortunate ommission. Sub-clauses (3) and (5) give the same privileges. So when sub-clause (5) is deleted by the Select Committee, sub-clause (3) also should have been deleted. The idea was to delete sub-clause (3) aslo, but unfortunately it was not deleted and so this amendment has been brought in.

ಶ್ರೀ ಸಿ. ಜೆ. ಮುಕ್ಕಣ್ಣಪ್ಪ.—ಹಾಗಾದರೆ ಸೆಲೆಕ್ಟ್ ಕಮಿಟಿಯ ರಿಪೋರ್ಟಿನಲ್ಲಿ ಕೊಟ್ಟದ್ದು ಸುಳ್ಳು ಎಂದು ಹೇಳಿದ. ಹಾಗೆ ಆಯಿತಲ್ಲವೆ ?

ಅಧ್ಯಕ್ಷರು.—ಈ ನಿರ್ಣಯ ಸೆಲೆಕ್ಟ್ ಕಮಿಟಿಯಲ್ಲಿ ತೆಗೆದು ಕೊಂಡಾಗ್ಗೆ ಶ್ರೀಮಾನ್ ಮಲ್ಲಾರಾಧ್ಯರು ಇರಲಿಲ್ಲ ಎಂದು ಕಾಣುತ್ತದೆ. ಇದನ್ನು delete ಮಾಡಬೇಕೆಂದು ಸೆಲೆಕ್ಟ್ ಕಮಿಟಿಯಲ್ಲಿ ನಿರ್ಣಯ ಮಾಡಿದೆ.

ಶ್ರೀ ಸಿ. ಜೆ. ಮುಕ್ಕಣ್ಣಪ್ಪ.—ಅದು ಹೇಗೆ ಆಯಿತು ?

Mr. SPEAKER.—The explanation is that it is unfortunate that it has not been omitted, but there was the recommendation of the Select Committee for its deletion since sub-clauses (5) and (3) are inter-related.

6–00 P.M.

Sri M. C. NARASIMHAN.—Sir, I do not understand the reason why the Government have now belatedly sought to delete the clause. There are important implications. Those persons who are registered as practitioners and whose name is entered in the register hitherto would be entitled to hold appointment as medical officers.

Sri C. M. ARUMUGHAM.—I want to know why wisdom has dawned upon the Hon'ble Minister so late in the day. He has a big department under his control, which he is not able to manage. There are three directors, so many deans and officers and yet this point has missed all of them.

Mr. SPEAKER.—The Member may make his remarks at the appropriate time.

†Sri M. C. NARASIMHAN.—There are certain implications if it is deleted. So far as the Bombay area is concerned, it seeks to take away an existing right ; they were deemed eligible for appointment in

Bombay area. The repealing clause in this bill does not continue such a provision under this bill, which means that provision would lapse. Persons eligible then would not be eligible now.

After all this section only says that a person is eligible. It does not mean that he is entitled to it because there is a difference between eligibility and entitlement. After all an Ayurvedic man will not apply for a post which requires M.B.B.S. or allopathic qualification.

The Minister said that the question of appointment and the eligibility for appointment is taken care of under the qualifications prescribed in the advertisements. If that be the position, why thus fuss and why the Ayurvedic or Unani Practitioners be discriminated. Under the Mysore Medical Registration Bill, 1961, in Clause 21, a person whose name is entered in the medical register shall be eligible to hold any appointment in a hospital or dispensary. A similar clause will do in respect of Indian medicine practitioners. There was such a provision in Bombay, Madras and there is such a provision under the Indian Medical Registration Act. Moreover that has been accepted in principle by this House and it is too late in the day for any attempt to alter it. I would therefore request the Minister to withdraw the amendment.

**ಶ್ರೀ ಸಿ. ಜೆ. ಮುಕ್ಕಣ್ಣಪ್ಪ.**—ಸ್ವಾಮಿ, ನಾವು ಈ ವಿಚಾರಗಳನ್ನೆಲ್ಲ ಹೇಳಿದರೆ ಅದು ಒಂದು ಅಪದ್ಧ ಎನ್ನುತ್ತಾರೆ. ಏಕೆಂದರೆ "ಕಿಂಗ್ ಕೆನ್ ಡು ನೋ ರಾಂಗ್" ಎಂದು ಹೇಳುವಂತೆ ಅಧಿಕಾರ ಇರತಕ್ಕವರು ಏನು ಬೇಕಾದರೂ ಮಾಡಬಹುದು. ಅದು ಅಪರಾಧವೆಂತ ಆಗುವುದಿಲ್ಲ. ಈ ವಿಚಾರ ಈ ಹಿಂದೆ ಇದೇ ಸಭೆಯಲ್ಲೂ ಚರ್ಚೆ ಆಗಿದೆ. ಆನಂತರ ಸೆಲೆಕ್ಟ್ ಸಮಿತಿಯ ಮುಂದೇನೂ ಈ ವಿಚಾರ ಬಹಳವಾಗಿ ಚರ್ಚೆ ಆಗಿದೆ. ಆಗ ಈ ವಿಚಾರವೇ ಇರಲಿಲ್ಲ. ಆದರೆ ಈಗ ಸರ್ಕಾರದವರು ಏಕಾ ಏಕೀ ಏನೋ ಆಚಾತುರ್ಯದಲ್ಲಿ ಈ ವಿಚಾರ ಕೈಬಿಟ್ಟು ಹೋಗಿತ್ತು ಎಂತ ಈಗ ಇದನ್ನು ಸೇರಿಸಿರುವುದನ್ನು ನೋಡಿದರೆ ಈ ಸರ್ಕಾರದಲ್ಲಿ ಪ್ರಾಮಾಣಿಕತೆ ಎಂಬುದು ಎಷ್ಟಿದೆ ಎಂಬುದನ್ನು ತೂಕ ಹಾಕಿ ನೋಡಬೇಕಾದ್ದು ಅನವಶ್ಯಕ! ಈ ಸರ್ಕಾರ ಆಡಳಿತವನ್ನು ಅಂತೆ-ಕಂತೆಗಳ ಮೇಲೆ ನಡೆಸುತ್ತಿದ್ದಾರೆಂಬುದು ಇದರಿಂದ ಚೆನ್ನಾಗಿ ವೇದ್ಯವಾಗುತ್ತದೆ. ಈ ದಿವಸ ಆಡಳಿತ ನಡೆಸುತ್ತಿರುವ ಪಕ್ಷದವರು "ನಾವು ಅಷ್ಟು ಸತ್ಯವಂತರು, ಇಷ್ಟು ಸತ್ಯವಂತರು, ನ್ಯಾಯವಂತರು, ಧರ್ಮಪರಿಪಾಲಕರು" ಎಂತ ಹೇಳಿಕೊಳ್ಳತಕ್ಕ ಪಾರ್ಟಿಯ ಸರ್ಕಾರ ಈ ದಿವಸ ಇಂಥ ಕೆಲಸ ಮಾಡಬಹುದೇ–ಇದರಿಂದ ಈ ಸರ್ಕಾರಕ್ಕೆ ಗೌರವ ಬರುತ್ತದೆಯೇ ಎಂತ ಕೇಳುತ್ತೇನೆ ? "ಆಚಾತುರ್ಯದಿಂದ ಕೈಬಿಟ್ಟು ಹೋಯಿತು" ಎಂದು ಹೇಳತಕ್ಕ ಸರ್ಕಾರದಲ್ಲಿ ಏನಾದರೂ ಪ್ರಾಮಾಣಿಕತೆ ಇದೆಯೇ ಎಂತ ಕೇಳುತ್ತೇನೆ ? ವಿರೋಧ ಪಕ್ಷದ ಮಾನ್ಯ ನಾಯಕರು ಇದು ಹೇಗೆ ಕೈಬಿಟ್ಟು ಹೋಯಿತು ಎಂತ ಕೇಳಿದ್ದಕ್ಕೆ ಏನೋ ಪ್ರಮಾದವಶಾತ್ ಆಗಿ ಹೋಯಿತು ಎಂತ ಒಂದು ಸಮಾಧಾನ ಹೇಳಿ ಬಿಟ್ಟರೆ ಅಲ್ಲಿಗೆ ಎಲ್ಲವೂ ಸರಿಹೋದಂತಾಯಿತೇನು ? ನಾನು ಈ ಆಡಳಿತ ಪಕ್ಷದವರೇನೇನು ತಪ್ಪು ಮಾಡುತ್ತಿದ್ದಾರೆಂಬುದನ್ನು ವಿಶದವಾಗಿ ತಿಳಿಸೋಣವೆಂದರೆ ಅಧ್ಯಕ್ಷರು ನನ್ನ ಬಾಯಿಗೆ ಬೀಗ ಹಾಕಿ ಬಿಟ್ಟಿದ್ದಾರೆ.

ಸ್ವಾಮಿ, ಮಾನ್ಯ ಮಂತ್ರಿಗಳು ಮಾತನಾಡುತ್ತ ಸೆಲೆಕ್ಟ್ ಕಮಿಟಿಯಲ್ಲಿ ತೀರ್ಮಾನ ವಾಯಿತು ಎಂದು ಅಪ್ಪಣೆ ಕೊಡಿಸಿದರು. ಅಲ್ಲಿ ತಮ್ಮ ಆಫೀಸಿನ ರಿಪೋರ್ಟರುಗಳು ಹಾಜರಿದ್ದು ಅಲ್ಲಿ ನಡೆದ ನಡೆವಳಿಕೆಗಳನ್ನು ಬರೆದು ಕೊಂಡಿದ್ದಾರೆ. ಆ ವರದಿಯನ್ನು ನಮಗೆ

(ಶ್ರೀ ಸಿ. ಜೆ. ಮುಕ್ಕಣ್ಣಪ್ಪ)

ಕೊಡುವುದಕ್ಕೆ ಸಾಧ್ಯವೇ? ಇದು ಹೇಗೆ ಬಂದಿದೆ ಎಂದು ತಿಳಿದುಕೊಳ್ಳಲು ಆ ವರದಿಯನ್ನಾದರೂ ತಾವು ದಯಪಾಲಿಸಬಲ್ಲಿರಾ ?............

Mr. SPEAKER.—Reading as it is, a registered medical practitioner would be eligible to hold an appointment in any medical institution.

Sri K. K. HEGDE.—By deleting that clause, it does not prevent anybody from holding the appointment.

Mr. SPEAKER.—If it is deleted, it may be that the subsequent interpretation is that a practitioner registered in a certain system of medicine is not entitled to become a medical officer.

Sri J. B. MALLARADHYA.—The report of the Select Committee makes it very clear. On page 3:

> "The Committee are of the opinion that the medical institutions referred to in this item need not necessarily be institutions supported by or receiving grant from the State Government. This item has accordingly been amended."

We have no intention to attribute any motives to the Minister The point that I raised was, it requires a little more clarification than what is now before the House. If you want to delete that, the substance of my argument is, sub-clauses (3) and (5) of Clause 20 are on the same footing and even if this is allowed to be retained, heavens will not fall.

Mr. SPEAKER.—On a matter of principle there is no difference of opinion that a registered Medical Practitioner may be appointed as a Medical Officer. If this is deleted, will it not work against the registered medical practitioner?

Sri K. K. HEGDE.—It will never affect any appointment by any authority by deleting this.

Mr. SPEAKER.—If it is not going to affect any appointment, why not delete it?

Sri R. NAGAN GOWDA.—Sub-clause (3) is merely redundant. It is superfluous. Even without that, an officer who is trained in a certain system of medicine is entitled to hold an office in an institution.

Sri B. D. JATTI.—If it is read very carefully, sub-clause (3) only gives the right for being eligible for being appointed. Government may appoint or may not appoint. This sub-clause is concerned only with eligibility. There is no difficulty in retaining it.

Sri K. K. HEGDE.—The privileges mentioned in sub-clause (5) have been removed and as such, we thought it was not necessary to have sub-clause (3). I have already explained that by retaining or deleting, it does not change matters. I have no objection in withdrawing the amendment.

*The amendment was, by leave of the House, withdrawn.*

Mr. SPEAKER.—The next amendment stands in the name of Sri V. Srinivasa Shetty.

Sri V. SRINIVASA SHETTY.—Sir, I beg to move:

"That in Clause 20, in para (4), for the words 'to which he belongs' occurring at the end, the words 'in which he had been trained' shall be substituted."

Mr. SPEAKER.—Amendment moved;

"That in Clause 20, in para (4), for the words 'to which he belongs' occurring at the end, the words 'in which he had been trained' shall be substituted."

†Sri V. SRINIVASA SHETTY.—I have already given enough reasons to retain the rights of these qualified doctors to practise in the systems of medicine in which they are being trained. I made further enquiries in the matter. In the G.C.A.M. College in Mysore, the Ayurveda subjects are being taught for the last few years by the diploma-holders. This is a graduate course in a college and there are Five or Six Lecturers or Professors who are only Diploma-holders (L.A.M.S.), whereas Allopathy is taught in the Medical Colleges by Medical Graduates and physicians and Surgeons of the K.R. Hospital, Mysore. To say that the Lecturers of the Medical College and Physicians of the K.R. Hospital should be debarred from dispensing medicine under the modern system and to say that they eligible to dispense under the Ayurvedic system, is something preposterous. Sir, I know, there was a time when there was no lecturer in the Ayurvedic College. The only persons were the Surgeons and the Physicians in the modern medicine. Is any Ayurveda thought there? Practically nothing is taught. If it is the elementary right he wants to exercise, we are depriving him of that right. I challenge the Hon'ble Minister and he also knows it.

Sir, if this is conceded, I may withdraw the amendments. This is a very simple amendment. Let them be given the right to practice in Allopathy.

Sri K. K. HEGDE.—Sir, this is a very mischievous amendment, I should say. It is construed that the boys in G.C.A.M. are also trained in Allopathy. I would like to make it clear. If you say "trained" the Ayurveda practitioners are not trained in such system. So, they would be debarred. I request the Hon'ble Member to withdraw his amendment.

Mr. SPEAKER.—The question is:

"In para (4) for the words 'to which he belongs' occuring at the end, the words 'in which he had been trained' shall be substituted.'

*The amendment was negatived.*

Mr. SPEAKER.—The question is:

"That Clause 20 stand part of the Bill".

*The motion was adopted.*

Clause 20 was added to the Bill.

Mr. SPEAKER.—The question is:

"That Clauses 21 to 42, both inclusive, stand part of the Bill".

*The motion was adopted.*

Clauses 21 to 42, both inclusive, were added to the Bill.

Mr. SPEAKER.—Schedule 1. There is an amendment.

Sri V. SRINIVASA SHETTY.—I beg to move:

"That item 16 under the heading 'Ayurveda' shall be placed under 'Integrated Medicine' as item 20".

Mr. SPEAKAR.—Amendment moved:

"Item 16 under the heading 'Ayurveda' shall be placed under 'Integrated Medicine' as item 20".

†Sri V. SRINIVASA SHETTY.—Sir, I do not want to waste my breath again and again. The argument seem to fall on quite deaf ears. The justice of our argument seems to be partially admitted but some prestige seems to be there. It is a sheer case of prestige in not admitting the argument. Sir, all sorts of degrees are lumped together here under the system of integrated medicine, admittedly not superior to the people in anyway—these people who are trained as G.C.A.M. Why should they be deprived of their right, I am not able to understand. I request even at this later stage to see reason to include the G.C.A.M. under the Integrated Medicine.

†Sri J. B. MALLARADHYA.—Sir, I have to join hand with my friend in regard to this amendment. Sir, a large body of students are allowed themselves to be mislead. Something must be done to this batch of students of last year. Further Sir, if I have got to challenge the Schedule, where is Integrated system of medicine defined in this Bill? Everything else in this world is defined in this Bill, but what does integrated system of medicine mean? When you are bringing 19 categories of people under this, where is the objection to include G.C.A.M. also, I want to ask. This is also a system of medicine. What is the legal objection or valid objection not to include this? You have at the back of your mind that they should practice Sudha Ayurveda. But, it is not born by facts. Sir, I already warned the Government that a spade of writ petitions would come and they may get the virdict from the High Court that justice has not been done to these people. I know that this Bill will be passed because they have the majority. I want the Chief Minister not to be too rigid about this. I see a very perceptible attitude rigidity. You can have severe restriction from 1st July 1962. There is no compromise so far as Ayurveda is concerned. But, so far as this

batch is concerned, I feel, there is injustice done. I request the Hon'ble Minister to see justice of the claims and revise his opinion.

Sri K. K. HEGDE.—Sir, the very purpose of this amendment is well-known. I oppose the amendment.

Mr. SPEAKER.—The question is:

"That item 16 under the heading 'Ayurveda' shall be placed under 'Integrated Medicine' as item 20."

*The amendment was negatived.*

Mr. SPEAKER.—The question is:

"That the Schedule stand part of the Bill."

*The motion was adopted.*

The Schedule was added to the Bill.

6–30 P.M.

Mr. SPEAKER.—Clause 1, the Preamble and the Short Title.

The question is:

"That Clause 1 the Preamble and the Short Title stand part of the Bill."

*The motion was adopted.*

Clause 1 the Preamble and the Short Title were added to the Bill.

*Motion to pass.*

Sri K. K. HEGDE.—Sir, I beg to move:

"That the Mysore Ayurvedic and Unani Practitioners Registration and Miscellaneous Provisions Bill as reported by the Select Committee be passed."

Mr. SPEAKER.—The question is:

"That the Mysore Ayurvedic and Unani Practitioners Registration and Miscellaneous provisions Bill, 1960 as reported by the Select Committee be passed."

*The motion was adopted.*

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## MADRAS ALIYASANTHANA (MYSORE AMENDMETN) BILL, 1961.

*Motion to Consider.*

Sri B. VAIKUNTA BALIGA.—Sir, I move:

"That the Madras Aliyasanthana (Mysore Amendment) Bill, 1961, be taken into consideration."

Mr. SPEAKER.—Motion moved:

"That the Madras Aliyasanthana (Mysore Amendment) Bill, 1961, be taken into consideration."